



**Fauquier County**  
**Department Of Environmental Services**  
*Solid Waste Management, Recycling, & Gypsy Moth*

6438 College Street  
Warrenton, VA 20187

Phone: (540) 347-6811  
Fax: (540) 341-7129

Website: [www.fauquiercounty.gov](http://www.fauquiercounty.gov)

**REQUEST FOR NON-COMMERCIAL/RESIDENTIAL EXCEPTION PERMIT**

Name: \_\_\_\_\_ Phone: \_ (\_\_\_\_) \_\_\_\_\_

Mailing address: \_\_\_\_\_

County address (if different): \_\_\_\_\_

***\*Please include proof of residency\****

**Reason for request: (check all that apply)**

\_\_\_\_\_ New Vehicle

\_\_\_\_\_ New Resident

\_\_\_\_\_ Use of Out-of-County Vehicle

\_\_\_\_\_ Use of Business Vehicle

\_\_\_\_\_ Non-Resident Landowner

\_\_\_\_\_ Rental Property

**Vehicle Information:**

Year/Make \_\_\_\_\_ License Plate # \_\_\_\_\_ State \_\_\_\_\_

I certify that the resident/landowner information is true. I am not a commercial business, nor will I bring any solid waste from outside the County into County facilities. I understand that my responsibility as a resident/landowner of Fauquier County is to adhere to the permitting process of the Department of Environmental Services.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

-----**FOR OFFICE USE ONLY**-----

\_\_\_\_\_ 7 Days

\_\_\_\_\_ 30 Days

\_\_\_\_\_ (Other) \_\_\_\_\_

**EXP Date:** \_\_\_\_\_

**Renewal Date:** \_\_\_\_\_

Authorizing Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Check ID:** Driver's License #: \_\_\_\_\_

Copy Attached: YES NO

Tax Form P.I.N. #: \_\_\_\_\_